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THE IDENTIFICATION OF COMMON COURSES IN PARAMEDICAL EDUCATION.
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INTEGRATION OF PARAMEDICAL EDUCATION THROUGH CONSOLIDATION OF RELATED TRAINING WAS STUDIED AS A FIRST STEP IN CURRICULUM DESIGN FOR MAXIMUM EFFICIENCY OF EDUCATIONAL PROGRAMS WHICH WILL MEET THE CHANGING REQUIREMENTS OF MEDICAL CARE OCCUPATIONS. THE OBJECTIVES WERE TO DETERMINE--(1) COURSES COMMON TO PRESENT PARAMEDICAL EDUCATION PROGRAMS, (2) THE NATURE OF SUCH COMMONALITIES, AND (3) GUIDELINES FOR THE INTEGRATION OF THESE PROGRAMS. ALL MAJOR MEDICAL, DENTAL, AND PARAMEDICAL GROUPS FROM UNIVERSITY, JUNIOR COLLEGE, HIGH SCHOOL, AND HOSPITAL PROGRAMS IN A METROPOLITAN AREA WERE REPRESENTED IN A WORKSHOP OF 24 PARAMEDICAL EDUCATORS WHO MET WEEKLY FOR 6 MONTHS. MEMBERS OF THE WORKSHOP GATHERED CURRICULUM MATERIALS FOR 20 PARAMEDICAL CAREERS FROM 126 EDUCATION PROGRAMS CONSISTING OF 2,613 COURSE TITLES IN 110 SEPARATE INSTITUTIONS THROUGHOUT THE UNITED STATES. COMPUTER PRINT-OUTS LISTED CAREERS, COURSES, SUBJECT CLASSIFICATIONS, AND RELATED DESCRIPTIVE DATA SUCH AS NUMBER OF CLOCK HOURS FOR EACH IN LECTURE, LABORATORY, AND CLINICAL EXPERIENCE. OF THE 126 GENERAL SUBJECT CLASSIFICATIONS. 78 WERE COMMON TO 2 OR MORE PARAMEDICAL FIELDS. THERE APPEARED TO BE A DIFFERENCE OF OPINION AMONG CURRICULUM DEVELOPERS OF PARAMEDICAL EDUCATION PROGRAMS AND A NEED FOR A STUDY IN EACH OF THE PARAMEDICAL CAREERS OF THE TASKS PERFORMED BY THE PRACTITIONERS. (JM)



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The Identification of Common Courses

in

Paramedical Education

College of Education Arizona State University Tempe, Arizona July 15, 1966

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The research reported herein was performed pursuant to Contract No. OB-6-85-032 with the United States Department of Health, Education and Welfare, Office of Education, Rureau of Research, Division of Adult and Vocational Research.

SUMMARY OF PROJECT

- A. Grant number OE-6-85-032
- B. Title: The Identification of Common Courses in Paramedical Education
- C. Investigator: Dr. Bill J. Fullerton, Professor and Chairman of the Department of Secondary Education, Arizona State University
- D. Institution: Arizona State University, Tempe, Arizona
- E. Duration: November 15, 1965 to July 15, 1966
- F. Purpose and Objectives:

Health care of the highest quality for all who need it is a goal that cannot be realized in any community where there are serious shortages of medical and paramedical personnel. The existence of such shortages is a serious problem of our times.

Many educators, hospital administrators, physicians and public administrators believe that a fragmented system of education in the paramedical fields is to some extent responsible for this situation. They point to the difficulties experienced in recruiting qualified students, the high drop-out rate (one-third to two-thirds of those who enroll), the high cost of instruction due to small classes and limited use of expensive equipment, lack of enough qualified faculty, and the frustrating discrepancies that occur between training programs and job requirements.

The Identification of Common Courses in Paramedical Education is an attempt to explore the integration of paramedical education through curriculum consolidation of related training programs. The overall objective of this research is to design curricula based on the changing requirements of medical care for educational programs with maximum efficiency. The objectives

of this phase of the research--the first step in designing these curricula--are to determine courses common to present paramedical education programs, the nature of such commonalities, and guide-lines for the integration of these programs.

A workshop was established consisting of 24 paramedical

G. Procedure:

educators representing all major medical, dental, and paramedical groups from university, junior college, high school and hospital programs in the Phoenix metropolitan area. This workshop met regularly each week for six months under the direction of the Principal Investigator, Dr. Bill J. Fullerton, and Dr. Willard Fetterhoff, a Curriculum Specialist in the Department of Secondary Education at Arizona State University. Members of the workshop gathered curriculum materials for 20 paramedical careers from 126 education programs in 110 separate institutions throughout the United States. Each member of the workshop collected materials in the area of his or her specialization, and professional judgment was exercised in analyzing, classifying, and interpreting these materials. Consistency in interpretation and interdisciplinary comparative judgment were achieved through the regular meetings of the entire workshop. Altogether, 2,613 course titles and their contents were examined. These were reduced to 126 general subject classifications. The subject classifications were programmed in a computer, together with the level (high school, post-high school, junior college, university or other) of education at which they occurred in each institution, and the depth of content as indicated by the number of clock hours devoted to classroom lectures, laboratory experience, and directed clinical practice.

The 20 educational programs analyzed by the workshop were as follows: three-year registered nurse, two-year registered nurse, licensed practical nurse, nurse aide, dental assistant, medical technologist, medical secretary, radiologic technologist, dental hygienist, dental technician, physical therapist, physical therapy assistant, occupational therapist, occupational therapy assistant, inhalation therapist, medical assistant, laboratory assistant, medical record librarian, medical record technician, radioisotope technician. The number of programs examined for each career ranged from one for dental technicians and physical therapy assistants to ten or more for three-year R.N.'s, two-year R.N.'s, medical technologists and medical record librarians.

Two computer print-outs were made listing the 20 paramedical careers studied and the courses required for each career in each of the 126 schools from which curriculum materials had been obtained. All 2,613 courses were listed under their respective subject classifications as indicated by the workshop, with the number of clock hours for each in lecture, laboratory, and clinical experience. Each course was identified also by the institution and the level of instruction at which it was given. A complete review of the first computer print-out was made by the workshop and reinterpretations of some of the data were programmed for the second computer run.

It was evident at this point that considerable variation was to be found in many of the same courses offered by different institutions. For example, the workshop had identified 22 separate courses under the subject classification of "Nursing, Fundamentals". These 22 courses are offered in 12 different schools. Two of the

schools require laboratory experience in Nursing Fundamentals; four of them require clinical practice in their fundamentals course; and the others require only classroom lectures. In the four schools requiring clinical practice in their fundamental course, the amount of clinical practice ranges from 20 to 360 clock hours. The total clock-hour requirement in Nursing Fundamentals in the 12 schools offering this course ranges from 18 hours to 465 hours.

Numerical comparisons were then made of the 20 paramedical programs for which information was obtained. The number of course titles examined by the workshop and the number of subject classifications to which they were reduced were listed for each program. For example, 18 three-year R.N. programs had been examined by the workshop and found to contain 425 different course titles. These were reduced to 27 subject classifications. Similarly, 12 medical technologist programs had been examined containing 175 course titles, which were reduced by the workshop to 32 subject classifications. The large number of course titles in each occupation indicated a general absence of standardization among schools educating students for the same career, an observation further borns out by the wide variations in clock hours for similar courses at different institutions. In reducing the large number of course titles to a smaller number of subject classifications, the workshop only approximated a standardization of subject matter, and it was recognized that only general rather than specific commonalities between programs could be identified.

On this basis it was found that a very wide range of commonalities existed in the subject classifications common to

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more than one career program. The number of programs to which each of the subject classifications was found to be common extended from two to 16. Forty-eight of the 126 subject classifications were limited to one field only. Seventy-eight of the subject classifications were common to more than one field. The 11 most frequent commonalities, with the number of career programs requiring the subject in each case, were: general education--16; anatomy and physiology--15; microbiology--14; uncommon courses--14; anatomy--12; professional ethics--12; general psychology--12; electives--12; medical terminology--11; mathematics--9; general chemistry--9. Forty of the subject classifications were common to four or more paramedical careers.

Further analysis of the commonalities between and among the 20 paramedical careers revealed that each career has substantial numbers of subject classifications in common with each of several other careers. In a few cases the absence or near absence of commonality was also revealed. For example, the three-year registered nurse program has 16 subject classifications in common with the licensed practical nurse program; 10 in common with the radiologic technologist program; 14 in common with the dental hygienist program; and only one in common with the dental technician program.

A detailed analysis of variations in clock hours required by different institutions within each subject classification was made by the workshop. The range was determined for each subject classification within each of the 20 paramedical education programs. Microbiology, for example, which was found to be among the most common subject classifications (required in 14 of

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the 20 paramedical education programs studied), had a range in clock hours for three-year registered nurses from 36 at one school to 256 at another. The same course ranged from 55 to 128 clock hours for two-year registered nurse programs. For medical technologists, the range was from 96 to 880 clock hours.

A series of charts and tables containing the results of the computer print-out and the analyses and interpretations of those results by the workshop were constructed for final evaluation and summarization of the findings. These were made initially by the Principal Investigator and his professional staff, then submitted to the individual members of the workshop for editing. The report containing results and conclusions represents a concensus of the professional judgment of the members of the workshop based on the curriculum materials studied and the computer analysis of these materials.

H. Results and Conclusions:

Curricula for 20 paramedical education programs from 126 separate schools located in 110 institutions in 36 states revealed 2,613 course titles. These were reduced to 126 general subject classifications. Seventy-eight of these were found to be common to two or more paramedical education programs.

of the 20 paramedical education programs studied, 12 were found to have a high incidence of commonality of general subject classifications. Eight were found to have a lower incidence of commonality. For the most part, those with the higher incidence of commonality were the programs requiring higher levels of skill and knowledge. Common courses were less evident in programs requiring less training.

Considerable variat ons were revealed in course titles and course content (reflected by clock hours in lecture, laboratory and clinical experience) among institutions offering educational programs for the same paramedical careers. The minimum and maximum total clock hours required in any given subject classification varied extensively among different paramedical fields and within the same field.

In paramedical careers where national accreditating agencies exist or where the Council on Medical Education of the American Medical Association has established minimum essentials, the educational programs tend to be more standardized and do not vary as greatly as in careers for which educational standards are not prescribed. The extent of such standardization, however, is considerably less than might be expected. Differences of opinion among curriculum developers of all paramedical education programs are evidenced by the extensive differences in clock hours required in similar courses of study and in the different courses of study prescribed in the same paramedical fields.

It was clearly evident that many of the paramedical education programs in which students are trained for different careers require much of the same course content. This would indicate that curriculum developers can, in fact, combine courses, classes, faculty, facilities and materials for more efficient and economical programs.

Equally evident, however, is the need for behavioral objectives to be more precisely identified than has yet been done if significant results are to be accomplished. Studies should be conducted in each of the paramedical fields to ascertain the

relationships between required educational programs and actual job experience. The irregularity of general education requirements (communications, humanities, social and behavioral sciences, science and mathematics, and physical education) raises questions not of the value of general education but of its relationship to the particular requirements of each paramedical career. The proliferation of technical course titles and their wide variation in content and depth suggests that most of them could be substantially redesigned without endangering accreditation standards. A strong possibility exists that much of the content of both general education and technical courses could be taught in centrally located school systems rather than for each institution to expend time, talent, facilities and finances on small and possibly inferior classes.

The results of this research suggest rather strongly that paramedical education today reflects the personal philosophies of the educators who have developed a variety of curricula. Additional research would provide a foundation upon which to base new philosophical approaches to paramedical education which are more effective in terms of the tasks to be performed, and which are better able to meet the demands of scientific progress and changing health manpower requirements.

TABLE OF CONTENTS

Chapter		Page
ı.	THE PROBLEM AND SIGNIFICANCE OF THE STUDY	1
	The General Background for the Study	1 2 3 3 4
,	The Statement of the Problem	3
	The Delimitations of the Study	3
	The Objectives of the Study	4
II.	THE RESEARCH DESIGN AND PROCEDURES	5
	The Method of Research	5
	The Procedures Utilized in the Study	6
III.	THE PRESENTATION AND INTERPRETATION OF DATA	20
	The Paramedical Career Programs Analyzed	20
	in 20 Paramedical Careers	22
	Classifications	26
	and Subject Classifications Resulting in Each Paramedical	100
	Career Studied	122
	Paramedical Careers Studied	122
	The Total Number of Subject Classifications, Course Titles, and the Commonality of Subject Classifications in Each	& &
	of the 20 Paramedical Careers Studied	129
	of 123 Subject Classifications Among the 20 Paramedical	100
	Careers Studied	129
IV.	MAJOR FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS	146
v.	IMPLICATIONS FOR FURTHER RESEARCH	151
	APPENDICES	
	Appendix A: PMRP Form 1, Admission Requirements Report	154
	Appendix B: PMRP Form la, Admission Requirements Report	155
	Appendix C: PMRP Form 2, Technical Training Report	156
	Appendix D: PMRP Form 4, First Progress Report	157
	Appendix E: PMRP Form 5, Resources Materials	158

LIST OF TABLES

•
Paramedical Curriculum Advisory Committee
Research Assignments to Members of the Paramedical Curriculum Advisory Committee
Research Design and Procedures, Descriptive Method- Community Cooperation in Action Research
A Code Number Index to the Name of an Institution and Level of That Institution From Which Paramedical Career Programs Were Analyzed
Paramedical Career Programs Analyzed From 110 Institutions 21
A Code Number Index to the Subject Classifications in 20 Paramedical Careers
A Listing of Courses Reported in the Survey of 20 Paramedical Careers Grouped According to Subject Classifications
The Number of Programs Analyzed, Course Titles Classified, and Subject Classifications Resulting in Each Paramedical Career Studied
An Analysis of the Commonality of the 78 Subject Classifications Found to be Required in Two or More of the 20 Paramedical Careers Studied
The Total Number of Subject Classifications, Course Titles, and the Commonality of Subject Classifications in Each of the 20 Paramedical Careers Studied
A Cross Reference Chart Showing Frequency of Commonality of 123 Subject Classifications Among the 20 Paramedical Careers Studied
The Minimum and the Maximum Number of Combined Lecture, Laboratory, and Clinical Experiences (Expressed in Total Clock Hours) Required in Each of the 78 Subject Classifi- cations Thich are Common to Two or More of the 20 Paramedical Careers Studied

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CHAPTER I

THE PROBLEM AND SIGNIFICANCE OF THE STUDY

General Background for the Study

The need for qualified individuals to adminster to the health service or paramedical responsabilities associated with the activities of members of the medical and dental professions is apparent. Equally as noticeable is the fact that individuals engaged in allied medical and health service activities are always in short supply. Concerned individuals indicate, however, that the critical element is the alarming statistical information which reveals the increasing number of shortages of fully prepared graduates who are qualified and skilled in the many paramedical occupations and career fields. Charles A. Boylel reported in a current survey conducted by the Arizona State Employment Service that 14,280 persons were employed in 16 health service occupations in the State of Arizona. Of this number, 7,800 were employed in the Phoenix metropolitan area. The survey revealed that there were positions vacant at that time in each of the 16 paramedical occupations. This fact is serious enough, but more alarming were the survey figures which (taking into consideration the demand, the replacements, and the deficits) projected a net shortage of 2,321 persons in these 16 health service occupations in Arizons by 1970. Boyle reported further that an additional deficit could be enticipated as a result of the population growth in Arizona which has averaged an increase of seven per cent or more annually the past 15 years. Additional shortages will also result because of the recent Kerr-Mills and Medicare legislation, and because of a trend which

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Cherles A. Boyle, "Manpower Trends in Selected Paramedical Occupations," Manpower Planning and Employment Development Section, Arizona State Employment Service, June, 1965.

indicates people, with increasing frequency, are making demands and utilization of hospitals and other health agencies.

The increased specialization of health services, the recent social concern for extending health care, and the lengthening life span, all stress the need to direct our attention upon the preparation of personnel for paramedical careers. This problem should be of great concern to all of us and stated in direct and simple terms focuses attention upon (1) a shortage of paramedical service personnel and (2) programs which prepare qualified individuals for careers in paramedical occupations.

The Need for Study

Health agencies ranging from the Office of the Surgeon General to local hospital directors' offices are aware of the need to meet the critical shortage of personnel prepared in the paramedical occupations. They are also mindful of the need for improved efficiency in selection, education, and retention practices of paramedical personnel in an effort to help provide adequate health services for the present as well as to meet the demands of the future. In a survey conducted by Good Samaritan Hospital it was revealed there were between 1,200 and 1,300 students enrolled in health occupation training programs in the Phoenix metropolitan area in the spring semester of 1965. On the basis of past experience, not more than one-third of these students are expected to complete their training. This is a net annual graduation of less than 400, yet present population growth patterns in the Phoenix area alone requires an annual graduation of 600 to 700.²

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²Survey conducted by Good Semaritan Hospital, Phoenix, Arizona, March, 1965.

Many educators, hospital administrators, physicians and interested observers throughout the country believe that the present flagmented system of education for paramedical careers is to some extent responsible for these shortages. 3

The Statement of the Problem

It would appear from the fore oing discussion that a need exists to study several aspects of the problem area. This investigation, however, was confined to the curricular elements related to the problem area. It was believed that initial research efforts should be aimed at seeking answers to the following questions: are there courses required in paramedical education programs which are common to all or many of these programs? If so, what is the nature of this commonality and to what extent does the commonality exist? Can guidelines be established, based on the findings of this research, leading to a single paramedical education center and veloping an integrated approach to the curriculum of several related paramedical education programs?

Delimitations of the Study

Paramedical career fields for which education programs are offered in the Phoenix, Arizona metropolitan area were studied. In addition, data were collected and analyzed from out-of-state paramedical education programs not now available in the Phoenix area, but for which a recogn ed need exists at the present time. In all, a total of 20 paramedical careers were finally included in the study. They are listed below:

- 1. Three-year Registered Nurse
- 2. Two-year Registered Nurse
- 3. Licensed Practical Nurse
- 4. Nurse Aide

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- 5. Dental Assistant
- 6. Medical Technologist

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Several of these persons are referred to by name in the following section on Research Design and Procedures of this report. These observations are also to be found in the report of the National Task Force on Health Manpower, and in the recommendations of the National Advisory Committee on Health Occupations, adopted in December, 1964.

- 7. Medical Secretary
- 8. Radiologic Technologist
- 9. Dental Hygienist
- 10. Dental Technician
- 11. Physical Therapist
- 12. Physical Therapy Assistant
- 13. Occupational Therapist
- 14. Occupational Therapy Assistant
- 15. Inhalation Therapist
- 16. Medical Assistant
- 17. Laboratory Assistant
- 18. Medical Record Librarian
- 19. Medical Record Technician
- 20. Radioisotope Technician

Attempts were made to gather curricular materials from other paramedical education programs in addition to those listed above, but without success. The fact that some institutional representatives contacted failed to return materials for analysis or to return useable materials, in terms of this study's research design and procedures, was responsible for this problem. The study, therefore, is now related to the reader, in terms of the data returned relative to the 20 paramedical education programs listed previously.

Objectives of the Study

By way of summary, it is appropriate to state the objectives of the study. Stated briefly, the objectives of this investigation were (1) to identify courses which were common to two or more of the various paramedical education programs being researched, and (2) to determine the nature and extent of such commonality insofar as it might help the investigators suggest guidelines for the integration of some parts of these various paramedical education programs.

CHAPTER II

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RESEARCH DESIGN AND PROCEDURES

Method of Research

In general, the method of research employed was descriptive and analytical. The procedures involved, however, were somewhat unique because of the large number of specialized personnel involved in gathering and interpreting data. Therefore, the research methodology could be classified further as a form of action research. The terms of the approved research proposal set up some specifications which made action research involving community participation in this project an important part of the method of investigation. The proposal was designed, hopefully, as the first step of a continuing curriculum project in paramedical education which would ultimately result in improved efficiency in training paramedical specialists and which would help to alleviate shortages of paramedical personnel in the Phoenix matropolitan area. The purpose of the study necessarily called for the interest, support, involvement, and participation of members of the community. This proposal further was designed as an initial or introductory step toward determining if it would be practical to extend the concept of paramedical education consolidation to all of the hospitals and educational institutions in the Phoenix metropolitan area. The idea for the proposal originated in a community-wide cooperative enterprise of many hospital administrators, professional medical people, professional educators, and interested community lay leaders who were cognizant of the need and urgency for action.

The method of research, in other words, might appropriately be described as community cooperation in action research in order to collect, analyze, classify, and interpret data relative to paramedical education for purposes of helping to find solutions to a problem of growing and urgent community concern.



Efforts made to locate related research to support this research proposal revealed that relatively little information was available which was concerned with the development and improvement of paramedical education as a cooperative community enterprise such as envisioned here.

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Because of circumstances described above, a Paramedical Curriculum Advisory Coumittee was selected by the Phoenix Planning Board for a Health Services Education Center. The Phoenix Planning Board has overall responsibility for the planning program, including curriculum development. Table 1 presents a list of the names and the official positions of the 24 members selected for the Paramedical Curriculum Advisory Committee. From the official positions indicated for each of the members of the Committee, it can be noted that the committee was composed of administrative and faculty representatives from high school, junior college, university, and hospital training programs representing the seven major institutions in the Phoenix metropolitan area, and representing all major medical, dental, and paramedical groups. Numbers of this Advisory Committee represent institutions at which educational programs now exist for training personnel for paramedical careers. Horeover, many of them were officials who were directly responsible for and/or actively engaged in paramedical education and who had access to curricular data in paramedical education.

Procedures Utilized in the Study

Under the supervision of the Principal Investigator, Dr. Bill J.

Fullerton, Professor and Chairman of the Department of Secondary Education,

Arizona State University, Tempe, Arizona and assisted by the Director of the

Planning Program, Dr. Arthur M. Lee, Director, Arizona Health Services Education

Association, Phoenix, Arizona, and a Planning Advisor, Colonel Harold H. Moore,

Assistant Director, Arizona Health Services Education Association, the paramedical Curriculum Advisory Committee undertook the problem of accomplishing the

TABLE 1

PARAMEDICAL CURRICULUM ADVISORY COMMITTEE

Name

<u>Title</u>

Florette Awe, R.N. Chairman, Nursing Department Phoenix College Director of Physical Medicine and Rehabo Carl R. Bjorklund, M.D. ilitation, Chairman, Department of Physical Medicine and Rehabilitation Good Samaritan Hospital Director, School of Nursing Vurlyne Boan, R.N. Good Samaritan Hospital Professor of Biology Gordon V. Bradshaw, Ph.D. Phoenix College Assistant Professor of Education Eugene Chasey, Ed.D. Atizona State University Director, School of Nursing Sister Mary Christina, Ph.D.; R.N. St. Joseph's Hospital Architectural Consultant Paul Crosier Busby Associates Director of Laboratories

Ralph Fargotstein, M.D. Maricopa County General Hospital

Willard Fetterhoff, Ed.D. Assistant Professor of Education Arizona State University

Chairman, Department of Secondary Education: Bill J. Fullerton, Ed.D. Professor of Education Arizona State University

Research Assistant and Faculty Associate Donald Grandgenett Arizona State University

Professor of Education Nelson L. Haggerson, Ph.D. Arizona State University

Director of Rehabilitation Services Richard Harms, R.P.T. Good Samaritan Hospital

Director of Radiologic Technology Training Clyde Hollister, R.T., B.Sc. St. Joseph's Hospital

Chairman of Dental Hygiene Robert H. Huntington, D.M.D. Arizona State Dental Assoc. Paramedical Curriculum Advisory Committee, cont.

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Arthur M. Lee, Ph.D.

Director, Arizona Health Services
Education Association

Shirley Mannion, R.N. Department Head Practical Nursing Program Phoenix Union High School

Colonel Harold Moore Assistant Director, Arizona Health Services Association

William T. Northey, Ph.D. Assistant Professor of Microbiology Arizona State University

Charles Purtymun, D.M.D. Chairman of Dental Hygiene Arizona State Dental Assoc.

James Riordan, M.D. Director of Radiology
St. Joseph's Hospital

Samuel Runyon, A.R.I.T.

Director of Inhalation Therapy
St. Luke's Hospital

Irwin Spector, M.A. Director of Research and Curriculum Maricopa County Junior College System

Mildred Welnick, R.R.L. Director, Medical Records Department St. Joseph's Hospital

objectives of the research proposal. To review, these objectives were to determine courses common to present paramedical education programs; to determine the nature and extent of such commonalities; and to develop guidelines, if appropriate, for the integration of these programs.

The Paramedical Curriculum Advisory Committee was organized into a Workshop group. Dr. Willard Fetterhoff, a curriculum development specialist in the Department of Secondary Education at Arizona State University, was appointed as the Chairman and Director of the Workshop group by the Principal Investigator. Under Dr. Fetterhoff's supervision and direction, research assignments were made to members of the Paramedical Curriculum Advisory Committee Workshop staff. Assignments were made on the basis of their positions, responsibilities, and experience in the various paramedical careers. A Steering Committee was appointed consisting of the Workshop Chairman, Principal Investigator, and two professors who are specialists in curriculum development from the Department of Secondary Education at Arizona State University, Dr. Nelson Haggerson and Dr. Eugene Chasey. The Steerin Committee was responsible for the plan of action at the meeting of the Workshop staff. Research assignments given to the curriculum analysts of the 20 paramedical careers investigated are listed in Table 2. When a comparison of the assignments to researchers of paramedical careers, as listed in Table 2 is made with the official positions of the researchers, as listed in Table 1, it is readily apparent that all researchers were qualified professionals and many of them practitioners in the paramedical careers to which they were assigned investigation responsibilities.

The size of the sample in each of the paramedical programs researched was difficult to determine because there were many educational programs operating in some paramedical career fields and few in others. Another factor which required consideration in this regard was the similarity of many paramedical programs. This similarity was due to accrediting criteria set up by national



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TABLE 2

RESEARCH ASSIGNMENTS TO MEMBERS OF THE PARAMEDICAL CURRICULUM ADVISORY COMMITTEE

name .	PARAMEDICAL CAREERS RESEARCHED
Floretta S. Awe, R.N.	Two-year Registered Nurse
Carl R. Bjorklund, M.D.	Physical Therapist; Occupational Therapist; Physical Therapy Assistant; Occupational Therapy Assistant
Vurlyne E. Boan, R.N.	Three-year Registered Nurse; Medical Secretar
Sister Mary Christina, R.N., Ph.D.	Three-year Registered Nurse
Richard Harms, R.P.T.	Physical Therapist; Occupational Therapist; Physical Therapy Assistant; Occupational Therapy Assistant
Clyde C. Hollister, R.T., B.Sc.	Radiologic Technologist; Radioisotope Technician
Shirley Mannion, R.N.	Medical Assistant; Licensed Practical Nurse; Nurse Aide
William T. Northey, Ph.D.	Medical Technologist; Laboratory Assistant
Charles Purtymun, D.M.D.	Dental Hygienist; Dental Technician; Dental Assistant
James J. Riordan, M.D.	Radiologic Technologist; Radioisotope Technician
Samuel Runyon, A.R.I.T.	Inhalation Therapy
Mildred B. Welnick, R.R.L.	Medical Record Librarian; Medical Record Technician



associations for some paramedical careers and by the Council on Medical Education of the American Medical Association. The criteria of minimum essentials for Accreditation by these associations has tended to standardize, to some extent, the 10 approved training programs for three-year, two-year, and licensed practical nurses, medical technologists, radiologic technologists, medical record librarians, medical record technicians, occupational therapists, physical therapists, and inhalation therapists. A great number of paramedical trainees in many of the 20 careers investigated were receiving an education in programs which were not accredited by these national associations. Educational programs for many of the paramedical careers requiring fewer skills and less time in preparation, than the 10 mentioned above, varied greatly in content, depth, time, and standards. It was difficult, therefore, to make comparisons between the non-accredited paramedical programs studied and even more difficult to make comparisons between and among all of the 20 different paramedical careers researched. For these reasons and others, such as limitations of time and funds, each researcher on the Paramedical Curriculum Advisory Committee Workshop staff was asked to study the educational programs of at least 10 different training institutions in as many different geographical, metropolitan areas.

make professional and experiential judgments in the process of gathering, analyzing, classifying, and interpreting data in his paramedical specialty. The personnel involved in this research activity, as noted in Table 2, were qualified to research in the paramedical fields studied. The extreme specialization of certain paramedical fields necessitated involving such curricular analysts from such fields in gathering, analyzing, classifying, and interpreting

^{4 &}quot;Education Programs in Areas Allied to Medicine", Journal of the American Medical Association, Volume 194, Number 7, November 15, 1965.



data. Consistency in interpretation of data was aided by scheduled workshop meetings. Discussion at such meetings resulted in a general consensus relative to the subject classification of different course titles and the interpretation of courses of study. The final subject classifications and interpretations made by the curricular analysts were used as input data for analyses by the computer. The computer was programmed to select and print out the courses required in each paramedical career program, the courses common to various paramedical programs, and finally, the extent and nature of the commonality of such courses in the various paramedical career programs. Conclusions and recommendations were drawn from this data as hasic information to the writings of program guidelines for the preparation of paramedical practitioners. Table 3 presents, in diagrammatic form, the research design and procedures utilized in this investigation. Table 4 reveals the names and locations of the various 110 training institutions from which researchers on the Paramedical Curriculum Advisory Committee Workshop staff obtained programs for study and analysis. One hundred twenty-six paramedical education programs were secured for analysis by the various members of the Workshop staff from more than 300 contacts with training institutions. The 126 educational programs analyzed represented 110 training institions in metropolitan areas, for the most part, within 36 different states of the United States. Satisfactory geographical distribution was obtained.

The Paramedical Curriculum Advisory Committee Workshop staff met in weekly scheduled evening sessions to make plans, report progress, and to analyze and consolidate data collected. Instruments utilized to consolidate and record analyses and interpretations of paramedical education programs were prepared in the first meeting of the Workshop staff. These data collection instruments are included in Appendices A, B, and C of this report. An examination of these appendices will show that the researcher secured information as



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TABLE III

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RESEARCH DESIGN AND PROCEDURES

DESCRIPTIVE METHOD--COMMUNITY COOPERATION IN ACTION RESEARCH

INPUT - (Programs of study collected in the various paramedical fields.

Curricular analysts requested these programs from existing training institutions.)

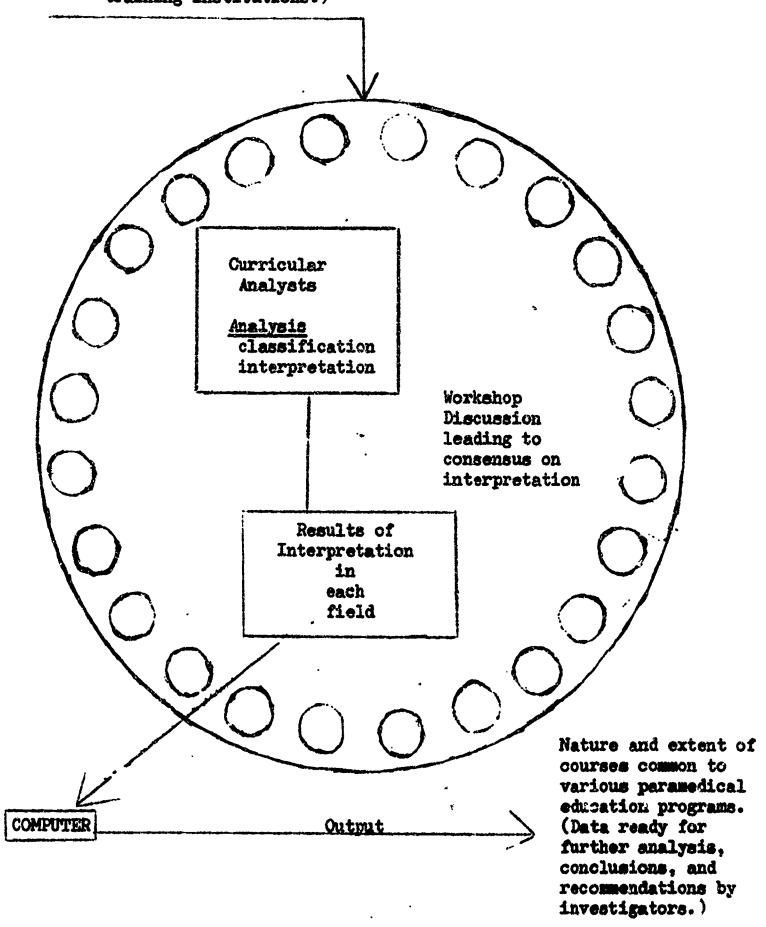


TABLE 4

A CODE NUMBER INDEX TO THE NAME OF AN INSTITUTION AND THE LEVEL OF THAT INSTITUTION FROM WHICH PARAMEDICAL CARRER PROGRAMS WERE ANALYZED

INSTITUTION

CODE	NAME	LOCATION	LEVEL*
7	ALEXIAN BROTHERS HOSPITAL AMERICAN MEDICAL ASSOCIATION COMMITTEE ON	CHICAGO, ILLINOIS	m i
ო	EDUCATION AND HOSPITALS ARIZONA STATE COLLEGE	FLAGSTAFF, ARIZONA	n
7	ARIZONA STATE UNIVERSITY	TEMPE, ARIZONA	graf (
ഗ ശ	BAPTIST MEMORIAL HOSPITAL BELLIN MEMORIAL HOSPITAL	MEMPHIS, TENNESSEE GREEN BAY, WISCONSIN	ന ന
7	BOWMAN GRAY SCHOOL OF MEDICINE (NORTH CAROLINA		•
œ	BRADLEY UNIVERSITY	WINSTON SALEM, NORTH CAROLINA PRORIA, ILLINOIS	ന പ
; m	BURLINGTON HOSPITAL SCHOOL OF NURSING	BURLINGTON, ICHA	ო
10	CARNEGIE COLLEGE	_	7
11	CHICAGO WESLEY MEMORIAL	_	๗
12	CLARK COLLEGE	VANCOUVER, WASHINGTON	cut :
en :	COLORADO STATE UNIVERSITY	H	, - 1 (
14	COOK COUNTY HOSPITAL		m c
51 .	-	ATLANTA, GEORGIA	M H
07	KASTERN SCHOOL FOR PHYSICIANS' ALDES KSSEX COLLEGE OF BUSTNESS	NEW LOKK, NEW LOKK NEWARK, NEW JERSEY	า เก
18	EVANGELICAL DEACONESS	144	Ŋ
19	EVERETT JUNIOR COLLEGE	EVERETT, WASHINGTON	7
20	FOOTHILL COLLEGE	LOS ALTOS HILLS, CALIFORNIA	7
27	PULLERION JUNIOR COLLEGE	7	6
22	GOOD SAMARITAN HOSPITAL		(Y)
23 24	HARPER HOSPITAL SCHOOL OF NURSING	DETROIT, MICHIGAN HORISTON TRYAS	1 (1)
**	HENSAN HUSTIAL)

5 = Other Institutions 4 = High School; 3 = Hospital; 2 = Junior College; 1 = University; *LEVELS:

	LEVEL	നനപ്പെപ്പപ്പെന്നെന്നെ പ്രച്ചെർവിന്നെ സ്സ്
	LOCATION	TULSA, OKLAHOMA ST. LOUIS, HISSOURI POCATELLO, IDAHO BLOCMINGTON, INDIANA SANTA BARBARA, CALIFORNIA LONG BEACH, CALIFORNIA LONG BEACH, CALIFORNIA LONG BEACH, CALIFORNIA GHARLESTON, SOUTH CAROLINA RICHMOND, VIRGINIA SAN DIEGO, CALIFORNIA GHICAGO, ILLINOIS BAST LANSING, MICHICAN LONG BRANCH, NEW JERSEY PITTSBURGH, PENNSTLVANIA NEW YORK CITY, NEW YORK NEWPORT, RHOÜE ISLAND SAN JOSE, CALIFORNIA COSTA MESA, CALIFORNIA COSTA MESA, CALIFORNIA PHOENIX, ARIZONA PHOENIX, ARIZONA PHOENIX, ARIZONA RICHMOND, VIRGINIA BUUSTON, TEXAS WICHITA, KANSAS SPRINCZIELD, MASSACHUSETTS PHOENIX, ARIZONA ALLEGANY, NEW YORK KANSAS CITY, HISSOURI
INSTITUTION	NAME	HILLCREST MEDICAL CENTER HOWER G, PHILLIPS HOSPITAL IDAHO STATE UNIVERSITY INDIANA UNIVERSITY INDIANA UNIVERSITY INDIANA UNIVERSITY IONG BEACH CITY COLLEGE ION ANGELES VALLEY COLLEGE ION ANGELES VALLEY COLLEGE HEDICAL COLLEGE OF NURSING HICHAEL REESE HOSPITAL AND MEDICAL CENTER HICHAEL REESE HOSPITAL AND MEDICAL CENTER HICHAEL REESE HOSPITAL AND MEDICAL CENTER HICHAEL REESE GORPITAL O'CONNOR HERCY COLLEGE OUR LADY OF THE LARE HOWOUT SIVAL O'CONNOR HOSPITAL O'CHENT PARE JUNICAE SCHOOL FUIT PARE JUNICAE HOSPITAL O'CHEN OF ANGELS HOSPITAL SCHEITER SCHOOL SPRINGTIER SCHOOL ST. LUGE'S HOSPITAL
CODE	NUMBER	222223 22120284764763884383838384828282828282828282828282828

	LEVEL	നെ നെ നെ നെ പെ പെ പെ പെ പെ പെ പെ വെ ഗ ഗ നെ ന	m
	LOCATION	PHOENIX, ARIZONA MOUNT CLEMENS, HICHIGAN ST. PETERSBURG, FLORIDA LOS ANGELES, CALIFORNIA CHICAGO, ILLINOIS MEDICAGO, ILLINOIS MEDICAGO, ILLINOIS MEDICAGO, ILLINOIS MEDICAGO, ARIZONA TUCSON, ARIZONA RERTELEY, CALIFORNIA LOS ANGELES, CALIFORNIA LOS ANGELES, CALIFORNIA CAINSENTILE, FLORIDA URBANA, ILLINOIS LAWENCE, KANSAS COLLEGE PARK, WARYLAND AND	DAYTON, OHIO
INSTITUTION	NAME	ST. JOSEPH'S HOSPITAL ST. JOSEPH'S HOSPITAL ST. JOSEPH'S HOSPITAL ST. JOSEPH'S HOSPITAL ST. VINCENT'S HOSPITAL STEDISH COVERANT HOSPITAL THOMPSON INSTITUTE UNIVERSITY OF ARLIPORNIA AT LOS ANGELES UNIVERSITY OF TALIFORNIA UNIVERSITY OF TALIFORNIA UNIVERSITY OF MARTIAND UNIVERSITY OF MISSOURI UNIVERSITY OF MISSOURI UNIVERSITY OF PACIFIC UNIVERSITY OF WISCONSIN VITERDO COLLEGE (ST. FRANCIS HOSPITAL) WASHINCTON ' UNIVERSITY ZAMECAAN SCHOOL WATIONAL OFFICE MEDICAL COLLEGE OF GEORGIA EMORY UNIVERSITY HOSPITAL KEESS SCHOOL OF PRACTICAL NURSING (PIMA COUNTY GENERAL HOSPITAL) COCHESE JUNIOR COLLEGE	OHIO SC
ži do	NUMBER	88 88 88 88 88 88 88 88 88 88 88 88 88	83



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NOTILITATION	LOCATION	DENVER, COLORADO	MESA, ARIZONA	SPKINGFIELD, OHIO PIERBE, SOUTH DAKOTA	PHOENIX, ARIZONA	BUFFALO, NEW YROK	BALLINORE, MARYLAND	SPOKANE, WASHINGTON	Lowell, Massachusetts	SAN ANTONI), TEXAS	MADISON, WISCONSIN	HAMPOND, INDIANA	SAN FRANCISCO, CALIFORNIA	STANFORD, CALIFORNIA	ST. LOUIS, MISSOURI	DURHAM, NORTH CAROLINA	PHILADELPHIA, PENNSTLVANIA	CLEVELAND HEIGHTS, OHIO	TUCSON, ARIZONA TUCSON, ARIZONA
	NAME	SAINT ANTHONY HOSPITAL SCHOOL OF PRACTICAL NURSING	FESA JUNIOR COLLEGE	MERCY CENTRAL SCHOOL OF PRACTICAL NURSING PIERRE SCHOOL OF PRACTICAL NURSING	ARIZONA STAIR HOSPITAL	STATE UNIVERSITY OF MEW YCRK AT BUFFALO	SINAI HOSPITAL OF BALTIMORE	SPOKANE COMMITY COLLEGE	St. Joseph's hospital	INCARNATE WORD COLLEGE (SANTA ROSA MEDICAL CENTER)	MADISON SAKATORIUM AND HOSPITAL	ST. MARGARET'S HOSPITAL	CITY COLLEGE OF SAN FRANCISCO	STANFORD UNIVERSITY (STANFORD MEDICAL CENTER)	ST. LOUIS UNIVERSITY	DUKE UNIVERSITY MEDICAL CENTER	MISERICORDIA HOSPITAL	DOCTORS HOSPITAL	TUCSON SCHOOL DISTRICT NO. 1 PIWA COUNTY CENERAL HOSPITAL, TUCSON
asov	NUMBER	06	16	3 g	*	95	76	86	66	100	101	102	103	104	105	106	107	108	110

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to the level of education (high school, post-high school, junior college, university, or other) at which courses in a given paramedical career were offered in each institution, the titles of the courses required before and after admission to the program, and the depth of content in each subject discipline as revealed by the number of clock hours devoted to classroom lecture work, laboratory experience, directed clinical practice, and total clock hours for each course title. Clock hours were regarded as the best measure of study since practices in the allowance of semester or quarter hours of credit varied widely among the training institutions for comparable clock hours spent in the study of a given subject. Reports recorded on the various instruments utilized for the collection of data were made available to keypunch operators who prepared data cards for the computer. Appendix D, PMRP Form 4, "First Progress Report" was used by the researchers in making progress reports of the analysis and interpretation of educational programs at the halfway point in the study. These reports assisted the Principal Investigator and the Workshop staff in preparing The First Progress Report for the United States Office of Education. Appendix B, PMRP Form 5, was used by the researchers to keep a record of resource materials secured from the various paramedical education institutions contacted.

The curriculum content analysts and the curriculum development specialists on the Workshop Advisory Committee gave special attention to the educational programs in the various institutions in the Phoenix are.

Because of familiarity with these programs and easy access to information concerning them, they were used by the researchers as a bases for comparison with programs from institutions in other parts of the United States.

Requests for additional information were made by the Research Assistant with several paramedical education centers including the College of Hearth Related Professions at the University of Florida; the Junior College at

St. Louis; St. Mary's Junior College in Minneapolis; Bronx Community College; Chicago City Junior College; Technical and Vocational Centers in Springfield, Massachusetts, Madison, Wisconsin, and Pittsburgh, Pennsylvania; as well as the private medical center of North Carolina Baptist Hospital, Winston-Salem, North Carolina.

Many curricular materials such as catalogs, syllabi, brochures, library materials, course descriptions, pamphlets from training institutions, information concerning national requirements for accreditation of paramedical careers, course guides and communication were collected in the progress of the study. All of these materials were classified and made available to the Committee in its regular Workshop meetings. Records of these resource materials were made on the data collection instrument PMRP Form 5 "Resource Materials" shown in Appendix E of this report.

Throughout the progress of the study, advice and service was available from the several curriculum development specialists and curricular analysts whose names and official positions are listed in Table 1, "Paramedical Curriculum Advisory Committee". In addition to the curricular analysts and the curriculum development specialists, it should be noted that an architectural consultant, Paul Crosier of Busby Associates, met with the Workshop group to audit the procedures of the study for his orientation and to offer professional advice which might later help to coordinate curriculum development with facilities planning.

CHAPTER III

THE PRESENTATION AND INTERPRETATION OF DATA

The Paramedical Career Programs Analyzed

It was reported in Chapter II on Research Design and Procedures that 126 paramedical programs from 110 different training institutions in 20 paramedical occupations were analyzed. Problems of determining the size of the sample for each of the 20 paramedical programs being researched were discussed. It was decided, however, that each curricular analyst should obtain and analyze at least 10 programs in the paramedical field(s) assigned to him in 10 different training centers that preferably were located in metropolitan areas. Table 5 shows the number of programs finally analyzed in each of the 20 paramedical careers studied and the number of contacts made with training institutions by the curricular analysts on the Paramedical Curriculum Advisory Committee Workshop staff in order to obtain the 126 programs. The curricular analysts examined eight or more programs from different training institutions in each of the following careers: three-year registered nurse, two-year registered nurse, licensed practical nurse, medical technologist, medical secretary, physical therapist, inhalation therapist, and medical record librarian. In some of the other careers only limited numbers of organized, well-defined programs were available for analysis. Only one organized program was analyzed for the dental technician and the physical therepy assistant; two organized programs were obtained for nurse side, dental assistant, occupational therapist, and medical records technician, although as Table 5 indicates, a greater number of contacts were made in attempts to locate planned, organized programs in these paramedical careers.

TABLE 5

PARAMEDICAL CAREER PROGRAMS ANALYZED FROM 110 INSTITUTIONS

Career Number	Career Title	Institutions Contacted	Programs Analyzed
1	Three-year Registered Murse	23	18
2	Two-year Registered Nurse	17	11
3	Licensed Practical Nurse	18	9
4	Nurse Aide	28	2
5	Dental Assistant	17	2
6	Medical Technologist	22	12
7	Medical Secretary	14	9
8	Radiologic Technologist	4	3
9	Dental Hygienist	14	4
10	Dental Technician	14	1
11	Physical Therapist	10	9
12	Physical Therapy Assistant	4	1
13	Occupational Therapist	7	7
14	Occupational Therapy Assistant	11	2
15	Inhalation Therapist	14	8
16	Medical Assistant	18	4
17	Laboratory Assistant	12	4
18	Medical Record Librarian	35	15
19	Medical Record Technician	13	2
20	Radioisotope Technician	3 298	3 126

Code Number Index to the Subject Classifications in 20 Paramedical Careers

Data concerning the 120 programs were analyzed and recorded upon the gathering and collection instruments shown in Appendices A, B, and C. From the gathering and collection instruments the data was transferred by key punch operators to computer data cards. The analysis of the 126 paramedical programs for all the careers studied yielded 2,613 separate courses which were classified into general subject classifications by the curricular analysts. Table 6 presents a code number index to the subject classifications into which the 2,613 separate courses were assigned. The curriculum analysts in each field had considerable difficulty in assigning a number of courses to certain subject classifications for a variety of reasons. In some instances the courses examined partook of the nature and scope of more than one subject classification. In other cases the limited description accompanying a particular course made it necessary for the curricular analysts to use their professional and experiential judgments in assigning such a course to a subject classification.

Three of the 126 general subject classifications need especial explanation. Code number 0 listed in Table 6 as "Uncommon Courses" was a classification assigned to course titles which were required in only one of the programs of a given paramedical career. In other words, such courses were not like any other course in that career field. Code number 124 listed in Table 6 as "General Education" was a classification assigned to course titles which the curriculum analyst in a particular field did not regard as a part of the technical training for that career. This classification, in general, included courses offered in the areas of communications, humanities, behavioral and social

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TABLE 6

CODE NUMBER INDEX TO THE SUBJECT CLASSIFICATION IN 20 PARAMEDICAL CAREERS

Code Number	Subject Classification
0	Uncommon Courses
1	Nursing Fundamentals
2	Nursing Trends
3	Anatomy
3 4	Anatomy and Physiology
5	Chemistry, General
6	Human Growth and Development
6 7	Nursing
8	Nursing, Clinical Conference
9	Clinical Practice, Nursing
10	Physiology
11	Nursing, Medical Surgical
12	Vocational Relationships
13	Ethics, Professional
14	Nutrition
15	Mathematics
16	Psychology, General
17	Health, Personal and Community
18	Human Relationships
19	Sociology
20	Microbiology
21	Pediatrics
22	Nursing, Psychiatric
23	Obstetrics
24	Pharmacology
25	Theology
26	Dietetics
27	First Aid
28	Botany
29	Physics
30	Zoology
31	Nursing, Geriatrics
32	Nursing, Procedures
33	Office Training and Management
34	Psychology, Applied
35	Terminology, Dental
36	Dental Assisting
37	Chemistry, Quantitative
38	Chemistry, Qualitative
39	Chemistry, Organic
40	Chemistry, Inorganic
41	Biochemistry
42	Clinical Laboratory Problems, Medical Technologist
43	Histology
44	Immunology
45	Laboratory Techniques, Medical Technologist



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Code Number	Subject Classification
46	Urinalysis
47	Blood Bank
46	Cytology
49	Electrocardiograph (EKG)
50	Hematology
51	Micro-technique, Medical Technology
52	Parasitology
53	Pathology Pathology
54	Serology
55	Virology
56	Accounting
57	Anatomy - Physics
58	Business Correspondence
59	Shorthand, General and Medical
60	Filing
61	Office Machines
62	Office Practice
63	Secretarial Practice and Procedures
64	Terminology, Medical
65	Typing
66	Economics
67	Medical Science Conferences
68	Administration, Departmental
69	Film Critique
70	Darkroom Chemistry and Technique
71	Diseases, Medical Surgical
72	Equipment, Radiology
73	Radiation Therapy
74	Radiation Safety
75	Radiographic Exposure Techniques
76 77	Radiographic Positioning
77 7ε	Radiographic Procedures Radiography, Intra-Oral
70 79	Radiography, Pediatrics
80	Radiology, Nursing Procedures
81	Radiation Physics
82	Radiation Therapy
83	Radiographic Isotopes
84	Anesthesia
85	Dental Anatomy
86	Clinical Practice, Dental
87	Dental Health
88	Orientation, Dental
89	Dental Materials
90	Physical Agents, Physical Therapy
91	Neurology
92	Clinical Assignment, Physical Therapy
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Code Number	Subject Classification 25
93	Organization & Administration, Physical Therapy
94	Orientation, Physical Therapy
95	Physical Therapy
96	Therapeutic Exercise
97	Orientation, Occupational Therapy
98	Handerafts
99	Occupational Therapy
100	Principles & Practices, Occupational Therapy
101	Kinesiology
102	Organization & Administration, Occup. Therapy
103	Physical Disabilities
104	Clinical Assignment, Occupational Therapy
105	Tests and Measurement, Physical
106	Organization & Administration, Inhalation Ther.
107	Equipment Operation, Inhalation Therapy
108	Clinical Practice, Inhalation Therapy
109	Inhalation Therapy
110	Orientation, Inhalation Therapy
111	Orientation, Medical Assistant
112	Basal Metabolism Rate (BMR)
113	Laboratory Assistant Responsibilities
114	Organization & Adm., Medical Record Librarian
115	Directed Practice, Medical Record Librarian
116	Medical Record Science, Medical Record Libr.
117	Medical Record Science, Fundamentals
118	Medical Record Science, Legal Aspects
119	Clinical Practice, Radioisotope Technician
120	Diagnostic Procedures, Radioisotope Technician
121	Instrumentation, Radioisotope Technician
122 123	Radiobiology, Radioisotope Technician
***	Mathematics, Radiological
124	General Education
125	Electives

sciences, sciences and mathematics (where not regarded as part of the technical training), and physical education. Some courses listed as "General Education" in one paramedical career might appropriately be classified by a curricular analyst as technical training in another field. Code number 125 listed in Table 6 as "Electives" was used for the assignment of all course titles identified as electives. In some programs these courses were not identified by title, but simply by the w word "elective(s)" with the number of semester or quarter hours of credit required.

It was desirable in this study to assign, and thus reduce, the 2,613 separate course title entries for the 126 programs analyzed to as small a number of broad-field subject classifications as possible and yet still have each subject classification easily recognizable as a separate subject of specific content.

The Listing of Courses Reported in the Survey of 20 Paramedical Careers Grouped According to Subject Classifications

Table 7 is a computer print-out listing of all 126 subject classifications for all of the 20 paramedical careers with the various course titles assigned to each subject classification occurring within a given paramedical field. Consider Career Number One, Three-Year Registered Nurse, as an example. Under this paramedical career are listed, by code number, separate subject classifications as follow:

- 1. Nursing Fundamentals
- 2. Nursing Trends
- 3. Anatomy
- 4. Anatomy and Physiology
- Chemistry, General
- Human Growth and Development 18. Human Relationships
- Nursing
- Nursing, Clinical Conference
- 9. Nursing, Clinical Practice
- 10. Physiology

- 11. Nursing, Medical Surgical !!
- 13. Ethics, Professional
- 14. Nutrition
- 15. Psychology, General
- 16. Health, Personal and Community
- 19. Sociology
- Microbiology 20.
- 21. Pediatrics
- 22. Mursing, Psychiatric

23. Obstetrics

24. Fharmacology

25. Theology

27. First Aid

29. Physics

31. Nursing, Geriatrics

124. General Education

125. Blectives

Columns 2, 3, 4, and 5 of Table 7 show the number of clock hours devoted respectively to each separate course in lecture, laboratory, clinical practice, and total clock hours as reported by the various training institutions. For uniformity and consistency the curricular analysts all interpreted one semester hour as equivalent to 15 clock hours and one quarter hour as equivalent to 10 clock hours.

As an example, in Table 7, under the Subject Classification
Number 1, "Nursing Fundamentals", of the three-year registered nurse
career, consider the first course title, "Adjustment, Professional 1".
The institution reporting this course indicated only that a total of
24 total clock hours were spent in lecture, laboratory, or clinical
practice or whether part of the 24 hours was spent in each kind of
training experience. In the second entry under "Nursing Fundamentals"
the course title was listed by the training institution as "Nursing
Fundamentals." The computer record in this case shows that students
in the three-year registered nurse career are required to devote 403
clock hours to this particular course. Of the total 408 hours required
in nursing fundamentals the student is required to spend 48 hours in
lecture, no hours in laboratory work, and 360 hours in clinical practice
or directed work experience.

Column 6 ("Inst"), Table 7 indicates the code number for the institution. By referring to Table 4 again it can be seen that Institution Number 1 is Alexian Brothers Hospital in Chicago Illinois. Both the course in "Adjustments, Professional 1" and "Nursing Fundamentals" are requirements in this same training institution. In column 7,

TABLE 7

A LISTING OF COURSES REPORTED IN THE SURVEY OF 20 PARAMEDICAL CAREERS

GROUPED ACCORDING TO SUBJECT CLASSIFICATIONS

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("Clas"), Table 7, opposite these two course titles the "1" indicates that the training institution was one offering post-high school work. In column 8, ("Levl"), Table 7, the "3" indicates that this training institution is a hospital. This information may be found by referring again to Table 3 for code number and level designation for each of the 110 training institutions from which the 126 paramedical educational programs were obtained.

An inspection of the listings of the 22 separate courses under the subject classification of "Nursing Fundamentals" gives other interesting information. For example, these 22 course titles are all from 12 different training institutions. Only two of the 12 different training institutions (numbers 23 and 42) require laboratory experience in Nursing Fundamentals. Only four of these training institutions (numbers 1, 9, 40, and 61) required hours in clinical practice in this subject classification. The requirement in clinical practice ranges from 20 to 360 clock hours in these four schools. The total clock hour requirement in Nursing Fundamentals for these 12 training institutions ranges from 18 hours in training institution #29 to 465 hours in training institution #58.

After a consideration of the example above, it is apparent that Table 7, the computer print-out listing, has valuable information which can be used for comparative purposes concerning the subject classifications and separate course titles, clock hours devoted to lecture, laboratory, and clinical practice, as well as the minimum and maximum number of clock hours required in a particular paramedical career program by the various training institutions. A cross reference can be made with Table 4 for the location of other data concerning the training institutions which is also enlightening.

The Number of Programs Analyzed, Course Titles Classified and Subject Classifications Resulting in Each Paramedical Career Studied

Table 8 is designed to give the reader a quick summarization as well as a means of making numerical comparisons with the data from the computer output presented in Table 7. Table 8 shows the 26 paramedical careers listed in code number order and the total number of programs analyzed in each. Column 4, Table 8 shows the number of separate course titles analyzed and assigned to subject classifications numbers 1-123. Column 5, Table 8, presents the number of separate course titles which were classified as follow:

- O Uncommon Courses
- 124 General Education
- 125 Electives

Column 6, Table 8, reveals the total number of course titles classified in each paramedical career. Column 7, Table 8, shows the number of different subject classifications to which the total course titles were assigned. For example, consider career #1, three-year registered nurse. Table 8 in column 3 shows that the curricular analysts for this career examined 18 programs from different training institutions and found 425 different course titles, (401 technical plus 24 classified as Uncommon, General Education, or Electives), which they assigned to 27 different general subject classifications. Curricular analysts for all careers examined 2,278 technical courses plus 335 Uncommon, General Education, and Elective courses which were assigned to 126 subject classifications.

An Analysis of the Commonslity of the 78 Subject Classifications Found to be Required in Two or More of the 20 Paramedical Careers Studied

Table 9 is a concise computer print-out summary of the commonality of the subject classifications to the 20 paramedical careers.



TABLE 8

THE NUMBER OF PROGRAMS ANALYZED, COURSE TITLES CLASSIFIED, AND SUBJECT CLASSIFICATIONS RESULTING IN EACH PARAMEDICAL CAREER

Code No.	Paramedical Career	Programs Analyzed	Course	umber of Titles As Classific		Number of Subject Classifica- tions in each Parame-
	and the state of t		#1-123	#0,124-5	Total	dical Career
1	3-year R.N.	18	401	24	425	27
2	2-year R.N.	11	156	79	235	21
3	L.P.N.	9	119	3	122	20
4	Nurse Aide	2	18	2	20	7
5	Dental Assistant	2	26	7	33	21
6	Medical Technologist	12	163	12	175	32
7	Medical Secretary	9	136	24	160	29
8	Radiologic Technologist	3	163	49	212	32
9	Dental Hygienist	4	99	18	117	30
10	Dental Technician	1	7	4	11	3
11	Physical Therapist	9	225	18	243	32
12	Physical Therapist Assat.	1	16	2	18	4
13	Occupational Therapist	7	168	6	174	27
14	Occupational Therapy Assit.	2	21	1	22	9
15	Inhalation Therapist	8	138	12	150	27
16	Medical Assistant	4	43	8	51	24
17	Laboratory Assistant	. 4	45	2	47	18
18	Medical Record Librarian	15	190	59	249	25
19	Medical Record Technician	2	66	J. 0	66	8
20	Radioisotope Technician	_3_	<u>77</u>		82	13
	TOTALS	126	227 8	335	2613	

Although identification of code numbers for the 20 paramedical careers and other information may be found in Table 5, they are listed below for quick reference in reading and interpreting Table 9.

1	Three-Year Registered Nurse	11 Physical (Therppiet
2	Two-Year Registered Nurse	12 Physical Therapist Assistant
3	Licensed Practical Nurse	13 Occupational Therapist
4	Nurse Aide	14 Occupational Therapy Assistant
5	Dental Assistant	15 Inhalation Therapist
6	Medical Technologist	16 Medical Assistant
7	Medical Secretary	17 Laboratory Assistant
8	Radiologic Technologist	18 Medical Record Librarian
ð	Dental Hygienist	19 Medical Record Technician
10	Dental Technician	20 Radioisotope Technician

In column 1, Table 9, the general subject classifications are listed in code number order, (See Table 6), except that the Subject Classification "O", Uncommon Courses, is listed last. As indicated before, Subject Classifications "O", "124", and "125" are described as Uncommon Courses, General Education Courses, and Elective Courses respectively. Table 9 reveals that, for example, the subject classification "Nursing Fundamentals" is required in four paramedical careers: three-year registered nurse, two-year registered nurse, licensed practical nurse, and nurse side. Table 9 further reveals that the subject classification "General Education" is required in 16 of the 20 paramedical careers. The subject classification, "Anatomy and Physiology", is required in 15 of the paramedical occupations. The 11 most frequent commonalities are as follow:

Subject Classification	Number of Paramedical Careers to Which Common
General Education	16
Anatomy and Physiology	15
Microbiology	14
Uncommon Courses	14
Anatomy	12
Ethics, Professional	12
Psychology, General	12
Thectives	12
Terminology, Medical	11
Mathematics	9
Chemistry, General	9

TABLE 9

AN ANALYSIS OF THE COMMONALITY OF THE 126 SUBJECT CLASSIFICATIONS FOUND TO BE REQUIRED IN TWO OR MORE OF THE 20 PARAMEDICAL CAREERS

SUBJECT CLASSIFICATIONS	ત્ત	N	m	. 4	w w	27	Α Ω Π Φ	8 8 9	ਜ 0 ਜ	ਜ ਜ	(V)	بر س	ਜ਼ 4	νί 44	4	.7	α <u>ύ</u>	o' Gi	0
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Table 9 reveals that 48 of the 126 subject classifications listed were required in only one of the 20 paramedical fields, while 78 subject classifications (including the three subject classifications "6", "124", and "125" were required in two or more of the 20 paramedical careers.

The Total Number of Subject Classifications, Course Titles, and the Commonality of Subject Classification in Each of the 20 Paramedical Careers Studied

- Table 10 is a synthesis of data taken from Tables 6, 7, 8, and 9. A reference to the four previous tables is desirable for best interpretation of data in Table 10. From this Table it can be seen that of the 126 subject classifications the following information obtains:
- 48 subject classifications relate to only one paramedical career,
- 30 subject classifications are common to 2 paramedical careers,
- 11 subject classifications are common to 3 paramedical careers,
- 13 subject classifications are common to 4 paramedical careers,
- 2 subject classifications are common to 5 paramedical careers,
- 5 authlect classifications are common to 6 paramedical careers,
- subject classifications are common to 7 presmedical careers,
- 3 stbject classifications are common to 8 paramedical careers,
- 2 subject classifications are common to 9 paramedical careers, remon to 11 paramedical careers, 1 subject classification
- 4 subject classifications; we r to 12 paramedical careers,
- 2 subject clessifications are 14 paramedical careers,
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- 126 total subject classifications assigned to all paramedical careers.

The Cross Reference Chart Showing Frequency of Commonality of 123 Subject Classifications Among the 20 Paramedical Careers Studied

Table 11 is a summary abstraction of the information revealed in Tables 7 and 9. Table 11 excludes from consideration the subject classifications of Uncommon Courses, #0 , General Education, #124, and Electives, #125. This cross reference chart shows the commonality of subject classifications between and among the 20 paramedical careers.

THE TOTAL NUMBER OF SUBJECT CLASSIFICATIONS, COURSE TITLES AND THE COMMONALITY OF SUBJECT CLASSIFICATIONS IN EACH OF THE 20 PARAMEDICAL CAREERS

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TABLE 10 cont.

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TABLE 11

CROSS REFERENCE CHART SHOWING FREQUENCY OF COMMONALITY OF 123* SUBJECT CLASSIFICATIONS AMONG THE 20
PARAMEDICAL CAREERS STUDIED

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t classifications of general education, electives and subjects uncommon are excluded.

For example, eareer #1, three-year registered nurse, has 19 subject classifications in common with career #2, two-year registered nurse; 16 subject classifications in common with career #3, licensed practical nurse; 10 subject classifications in common with career #8, radiologic technologist; 14 subject classifications in common with career #9, dental hygienist; and only one subject classification in common with the dental technician. The occurrence of commonality in subject classifications between two different paramedical careers was frequently observed. The following information presents the 24 occasions of greatest occurrence of commonality which existed between two different paramedical careers:

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Table 11 also shows the absence of commonality in subject classifications between and among the 20 paramedical fields.

The Minimum and the Maximum Number of Combined Lecture, and Clinical Practice Experience (Expressed in Total Clock Hours) Required in Each of the 78 Classifications Which Were Common To Two Or More of the 20 Paramedical Careers Studied

Table 12 is a general summary table showing the least number and the greatest number (expressed in total clock hours) of combined lecture, laboratory and clinical practice experience required in the 78 subject classifications found common in two or more of the 20 paramedical programs studied. Column 1, Table 12, shows the code number in numerical sequence for each of the 78 subject classifications which are common to two or more of the 20 paramedical careers. Column 2, Table 12, presents the 78 general subject classifications by name and lists for each classification the paramedical careers to which it is common. The remaining columns reveal the minimum and maximum number (expressed in total clock hours) required in combined lecture, laboratory, and clinical practice experiences for each (numbered 1 through 20) paramedical career for each of the 78 subject classifications. Consider the subject classifications #1, Nursing Fundamentals. This classification is common to careers #1, 2, 3, and 4 as identified earlier. Note that the total clock-hour requirements for career #1, three-year registered nurse, range from 10 to 465 hours for the subject classification, Nursing Fundamentals, as compared to 3 to 40 hours for career #4, Nurse Aide.

THE MINIMUM AND THE MAXIMUM NUMBER OF COMBINED LECTURE, LABORATORY, AND CLINICAL PRACTICE EXPERIENCES (EXPRESSED IN TOTAL CLOCK HOURS) REQUIRED IN EACH OF THE 78 SUBJECT CLASSIFICATIONS WHICH ARE COMMON TO TWO OR MORE OF THE 20 PARAMEDICAL CAREERS STUDIED

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subject classification included as a part of another subject classification in this field.

TABLE 12 Continued

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TABLE 12 Continued

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Table 12 reveals that there is a very wide range in the commonality, expressed in total clock hours of required training, for a given subject classification common to and required in several different paramedical fields. For example, consider the general subject classification of microbiology—emong the most common—required in 14 of the 20 paramedical education programs studied. A synthesis of data from Table 12 reveals the total minimum and maximum clock hours required in the study of microbiology in 14 paramedical career programs to range as follow:

Code	Career Requiring Microbiology	Range in Clock Hours
1	Three-Year Registered Murse	26 056
2	Two-Year Registered Murse	36 - 256
3	Licensed Practical Nurse	55 - 128
5	Dentel Academic Ruise	16 - 16
6	Dental Assistant	30 - .j30
ž	Medical Technologist	96 - 880
,	Medical Secretary	60 - 60
8	X-ray Technologist	
9	Dental Hygienist	90 - 90
11	Physical Therapist	75 - 75
13	Company and a second	6 - 6
15	Occupational Therapist	15 - 15
16	Inhalation Therapist	5 - 128
	Medical Assistant	40 - 40
17	Laboratory Assistant	• •
18	Medical Record Librarian	120 - 660
	month librarian	15 - 120

Similar comparisons like those above can be abstracted from the contents of Table 12 for each of the subject classifications required in two or more of the paramedical education programs studied.

CHAPTER IV

MAJOR FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

- 1. An analysis of 20 paramedical career programs revealed that 2,613 course titles could be assigned to 126 different general subject classifications.
- 2. Of the 126 general subject classifications, 48 were not common to any other paramedical field. These 48 general subject classifications, not common to any two paramedical career programs, in all probability would not be considered as part of a core program for training paramedical personnel.
- 3. Seventy-eight of the 126 general subject classifications were common to two or more paramedical fields.
- 4. Of the 2,613 course titles 34 were sufficiently unique to be classified under a general category subject classification "O" for uncommon. These courses titles, in all probability, would not be considered as a part of a core program for training paramedical personnel.
- 5. Of the 20 paramedical career training programs commonality of general subject classifications was greater among those for three-year registered nurse, 'two-year registered nurse, licensed practical nurse, dental hygienist, medical secretary, radiologic technologist, medical assistant, inhalation therapist, physical therapist, occupational therapist, medical record librarian and medical technologist than among the remaining eight programs.
- 6. Of the 20 paramedical career training programs commonality of general subject classifications was not as great among training programs for nurse aide, dental assistant, dental technician, occupational therapy assistant, medical record technician, laboratory assistant, physical therapy assistant, and radio-isotopa technician when compared with the commonality of general subject classifications among those listed in number 6, supra. This is to be expected inasmuch



as these careers generally require fewer skills, and a shorter time in training than most of the other careers studied.

- 7. Commonality of general subject classifications was greatest between:
 - a. three-year nursing and two-year nursing
 - b. three-year nursing and licensed practical nursing
 - c. three-year nursing and dental hygienist
 - d. medical secretary and medical assistant
 - e. dental hygienist and dental assistant
 - f. physical therapist and occupational therapist
- 8. Of the 78 general subject classifications common to two or more paramedical careers, general education courses ranked first; anatomy and physiology second; microbiology and uncommon courses third; anatomy, professional ethics, general psychology, and elective courses fourth; and medical terminology fifth as subject classifications commonly required.
- 9. The minimum and maximum total clock hours required in training for any given subject classification required in the several different paramedical fields varied extensively. Curriculum developers should study Table 12 carefully in light of the objectives of their own particular paramedical education programs before developing a "common" course which students from several paramedical education programs would study. At this point, it would appear that more information is needed before recommending the exact subject classifications and paramedical education programs which could and should be combined.
- 10. Standards for training, as regards courses and clock hours required, varied greatly among the 20 paramedical career programs studied. This condition was to be expected since obviously some of the paramedical careers call for greater knowledge and skill than others.

- 11. The educational programs for the same career in different training institutions revealed much variation relative to the particular courses required and with respect to the time spent in clock hours of either lecture, laboratory, and/or clinical practice experiences. This was particularly noticeable in the non-accredited programs.
- many training institutions in the same and in different paramedical careers made comparisons difficult in some instances and nearly impossible in a number of cases. Within programs for the same paramedical career similar course content carried many different course titles, some of which were difficult to assign to one general subject classification because they partook of the nature of two or more subject classifications. Refer to Table 7 for courses classed as "Nursing Trends", for example.
- 13. Some paramedical education programs do not meet the standards for accreditation of any recognized national medical or paramedical accrediting agency.
- 14. The Council on Medical Education of the American Medical Association had established minimum essentials for accrediting training programs in seven of the 20 fields studied: medical technologists, radiologic technologists, medical record librarians, medical record technicians, occupational therapists, physical therapists, and inhalation therapists. Minimum essentials had also been established for three-year, two-year and license practical nurse programs by the nursing associations. The minimum essentials for some of these careers had been in force several years and some were under study for revision. In the above 10 paramedical career fields the educational programs tended to be more standardized and varied to a lesser degree.
- and positions in various paramedical careers without having completed an accred-

ited training program. Some personnel held positions in these careers as a result of their work experience in hospital or health service facilities over a period of time. The limited number of accredited training institutions have not been able to supply enough formally prepared paramedical personnel graduated from accredited programs to meet the demand for health services. Many small hospitals have not had the time, facilities, and personnel to conduct formal programs of training which could meet accreditation standards.

- grams varied considerably in each of the specific areas of general education. The variation was due in part to the subject classification given a particular general education course given by curricular analysts. In some cases, a course which might be commonly regarded as general education was classified as a technical course by some institutions for a particular career field, while in another institution for the same career the same course was classified as a general education course.
- and motion requirements of each paramedical career investigated in this research. Such a series of studies in each career would ascertain what relationships there seem to be, if any, between what a student has to learn and what he is required to practice on the job. The present study suggests there is some disagreement among paramedical educators and curriculum developers with respect to the demands in several paramedical careers as evidenced by the different requirements in clock hours of study to prepare personnel to perform certain specific functions on the job.
- 18. Since certain of the different paramedical education programs required identical course experiences, it seems appropriate to suggest that curriculum developers could cooperatively combine courses, classes, faculty, facilies

ties and materials to more economically and efficiently prepare personnel for responsibilities in certain paramedical fields. As indicated earlier, behavioral objectives need to be identified more precisely than now seems to be the case, before cooperative activities to combine forces will bear fruitful outcomes.



CHAPTER V

IMPLICATIONS FOR FURTHER RESEARCH

1. Since there seems to be a difference of opinion among curriculum developers of paramedical education programs (as evidenced by the extensive differences in clock hours required in similar courses of study and the different courses of study prescribed in the same paramedical field) the implication exists that a study need be conducted in each of the paramedical careers of the tasks performed by the practitioners. An analysis of the job requirements, when compared with the curricular experiences presently programmed for a paramedical student, might suggest the need for a different set of learning experiences to prepare them for the job. It may possibly be the job requirements are such that a subdivision of speciality responsibilities exist which make it feasible to create additional and new paramedical careers. Hypothetically, one might suggest a possible solution to the problem of a shortage of paramedical personnel is to reduce the preparation period for the job. If the job specializations can be narrowed and the preparation periods shortened as a result of curriculum revisions and the creation of new paramedical careers, then logically one might expect paramedical education programs to have fewer drop-outs and thus produce a greater supply of graduates. The opposite rationale might produce similar results, also. Perhaps the combining of paramedical education experiences might permit a program to produce individuals in the same period of time who can perform a greater number of tasks. In other words, the present study suggests the need to examine every facet of our paramedical preparation programs. Certainly the present different approaches to the same objective suggest the need to examine each approach as well as some other innovative approaches.

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- 2. This study also suggests the need for developing accrediting agencies to help upgrade those educational programs where, at the present time, no accrediting agencies exist. Furthermore, in those paramedical career fields where accreditation standards are enforced there is reason to suggest greater efforts on their part be made to exert leadership in promoting experimentation and innovation in curriculum development.
- 3. There appeared to be a suggestion that General Education requirements (e.g., communications, humanities, social and behavioral sciences, science and mathematics, and physical education) were required irregularly among the various paramedical programs studied. This implies the need to determine what experiences in this area of study are necessary for each of the careers. Certainly, in metropolitan areas much of this content could be taught in a centrally located school rather than each institution expending time, talent, facilities, and finances for small classes of students. At the present time, this research reveals that much diffusion occurs in the area of General Education. Consolidation of content, faculty, facilities, and finances need be experimented with in order to bring about greater efficiency in the utilization of each. Certain technical courses fall into this same category and in these instances the implication suggests a similar consolidation, too.
- 4. This study directly suggests that programs which prepare paramedical personnel reflect the personal philosophies of the educators who have developed their curricula. One should expect this situation to develop and obtain, however, it is this condition which implies the need for research to determine what philosophical approach to a curriculum is more effective in terms of the tasks to be performed by the

practitioner. How much lecture, laboratory, and/or clinical practice experiences are necessary? While some of each must of necessity be required, the wide variation programmed experiences required in identical courses for identical careers suggests little research has been done to answer the previous question.

5. The nature of the design and procedures of this research proposal and the time, manpower, and finances available were not fully adequate to examine comprehensively the 2,613 different courses of this study to the extent and in the detail and breadth which was desirable. This study revealed the need to attempt research with a much larger budget and with employment of full-time curricular analysts in order to accomplish a greater depth of analysis.

MRP Form 1

ADMISSION REQUIREMENTS REPORT

Hospital or School Reporter	Demonstrations Discussions Lectures Seminars Directed Total Clock Experience Experience Hours	equired? No Ired? Required Before 1 Training Pro-	
Division Job			1. 2. 3. 4.

consider one semester hour as equal to: 15 clock hours of lecture, 45 clock hours of laboratory, 75 clock hours of clock hours of suboratory,

PMRP Form la

ADMISSION REQUIREMENTS REPORT

	1						
	Total Clock Hours						
School	Directed Clinical Experience						
Reporter	Laboratory Experience						
	Demonstrations Discussions Lectures Seminars						
Division Job	Post High School Courses Required Be- fore Admission to the Technical Train- ing Program (Continued):						
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Indicate clock hours under each category of experience. To change semester hours to clock hours consider one semester hour as equal to: 15 clock hours of lecture, 45 clock hours of laboratory, 75 clock hours of clinical or supervised practice.

PMRP Form 2

TECHNICAL TRAINING REPORT

	Total Clock Hours				
Rospital or School Reporter	Directed Clinical Experience				
	Laboratory Experience				
	Demonstrations Discussions Lectures Seminars				
Division Job	Technical Training Courses Required List in sequence to be taken as nearly as possible.				

VERENDIN C

Indicate clock hours under each category of experience. To change semester hours to clock hours, consider one semester hour as equal to: 15 clock hours of lecture, 45 clock hours of laboratory, 75 clock hours of clinical or supervised practice. clock hours of clinical or supervised practice.

APPENDIX ?

157

PMRP FORM 4

FIRST PROCRESS REPORT

ADVISORY COMMITTEE RESEARCHER
PARAMEDICAL FIELD
HOSPITAL AND/OR EDUCATIONAL INSTITUTION
DATES COVERED BY REPORT

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APPENDIX B

PMRP FORM 5

RESOURCES MATERIALS

	PARAMEDICAL	FIELD	+ RESEARCHER	
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